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## Fax

Attention: Issue Fee  
Company: United States Patent and Trademark Office  
Fax number: 571-273-2885  
From: Robert E. West  
Date: November 23, 2005

Number of Pages (including this cover): 3

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Applicant(s):	Alchas, et al.	Atty. Docket No.:	P-5258D1
Serial No.:	10/721,844	Group Art Unit:	3763
Filed:	November 25, 2003	Examiner:	Mendez, Manuel A.
For:	Prefillable Intradermal Delivery Device		

The following documents are attached to this facsimile:

1. Issue Fee Transmittal
2. Comments on Statement of Reasons For Allowance

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P-5258D1

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Alchas et al.

Conf. No.: 8014

Serial No.: 10/721,844

Art Unit: 3763

Filing Date: November 25, 2003

Examiner: MENDEZ,  
Manuel A.

Docket No: P-5258D1

Title: Prefillable Intradermal Delivery Device

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**COMMENTS ON STATEMENT OF  
REASONS FOR ALLOWANCE**

Sir:

Applicant hereby acknowledges the

Examiner's Reasons for Allowance. Applicant respectfully notes that there may be additional reasons for allowance that have not been specifically cited, and which may apply to various of the allowed claims, in addition to or instead of the cited Reasons. Applicant respectfully suggests that notwithstanding the Examiner's Reasons for Allowance, it is believed that each of the allowed claims is patentable in its own right and/or for other reasons raised during the prosecution and/or explained in the specification of this application.

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING TRANSMITTED VIA FACSIMILE TO THE COMMISSIONER FOR PATENTS, FACSIMILE NUMBER 571-273-2885 or to P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 ON:

November 23, 2005

BY: LORRAINE KOWALCHUK

  
(SIGNATURE)11/23/05  
(DATE)

Respectfully submitted,

Dated: November 23, 2005

By: Robert E. West  
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